



State of Washington  
Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.

For Ecology Use

Fee Paid 10<sup>00</sup>

Date 7/3/03

CK # 15844 For

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name Michael D. Howe Home Tel: ( 509 ) 826 - 4543  
Mailing Address 700 Okoma Drive Work Tel: ( 509 ) 826 - 6316  
City Omak State WA Zip+4 98841 + 9593 FAX: ( 509 ) 826 - 4704

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☒ Same as above

Name \_\_\_\_\_ Home Tel: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
Mailing Address \_\_\_\_\_ Work Tel: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 \_\_\_\_\_ + \_\_\_\_\_ FAX: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_  
Relationship to applicant \_\_\_\_\_

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 45 (☒ gallons per minute or  
☐ cubic feet per second) from a ☐ surface water source or ☒ ground water source (check only one) for the purpose(s)  
of group domestic supply to 9 homes (Group B). ATTACH A "LEGAL"  
DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not  
sufficient.

Estimate a maximum annual quantity to be used in acre-foot per year: 9

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:

From    /   /    to    /   /   

Section 4. WATER SOURCE

IF SURFACE WATER	IF GROUNDWATER
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:	A permit is desired for <u>1</u> well(s).
Number of diversions: _____	
Source flows into (name of body of water):	Size & depth of well(s): <u>8" x 42'</u>

LOCATION

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: 2200 feet South and 150 feet West of the N/E corner of Section 27, Township 34 Range 26 EWM, Okanogan County

1/4 of	1/4 of	Section	Township	Range (E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
S/E	N/E	27	34	26 E	Okanogan			

For Ecology Use	Date Received: <u>July 3, 2003</u>	Priority Date: <u>July 3, 2003</u>	<u>OKANOGAN</u>
SEPA: <u>Exempt</u> /Not Exempt	FERC License # _____	Dept. Of Health # _____	
Date Accepted As Complete <u>08-08-03</u>	By <u>[Signature]</u>	Date Returned _____	By _____ WRIA: <u>49</u>



## Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: Valley View Park Subdivision (DOH #00780Y)
- B. Briefly describe your proposed water system. (See instructions.)  
The system consists of a 42' well with a 1-1/2 hp submersible pump and a 1,000 gallon pressurized tank and 1-1/2" distribution line to each of 9 homesites.
- C. Do you already have any water rights or claims associated with this property or system? ☒ YES ☐ NO  
PROVIDE DOCUMENTATION. Permit G4-29768P

## Section 6. DOMESTIC/PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: 9 Type of connection Homes  
(Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☐ YES ☒ NO  
If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☐ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☐ NO  
If yes, when was it approved? \_\_\_\_\_ Please attach the current approved version of your plan.

## Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Completed for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: ~0~
- B. List total number of acres for other specified agricultural uses:  
Use \_\_\_\_\_ Acres \_\_\_\_\_  
Use \_\_\_\_\_ Acres \_\_\_\_\_  
Use \_\_\_\_\_ Acres \_\_\_\_\_
- C. Total number of acres to be covered by this application: \_\_\_\_\_
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)  
Add up the acreage in which you have a controlling interest, including only:  
‡ Acreage irrigated under water rights acquired after December 8, 1977;  
‡ Acreage proposed to be irrigated under this application;  
‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 2000 acres? ☐ YES ☐ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO  
If yes, enter permit no.: \_\_\_\_\_
- E. Farm uses:  
Stockwater - Total # of animals \_\_\_\_\_ Animal Type \_\_\_\_\_ (If dairy cattle, see below)  
Dairy - # Milking \_\_\_\_\_ # Non-milking \_\_\_\_\_



## Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☒ YES ☐ NO

*NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.*

## Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

Begin on Main Street (SR 215) in Downtown Omak, proceed North on Main Street (turns into Riverside Drive) to intersection of Hillcrest Avenue; turn left and continue .7 miles (Hillcrest turns into Ross Canyon Road); turn left onto Hahn Road (the well is located at the intersection of Ross Canyon Road and Hahn Road). The place of use are first and last homesites on Hahn Road and all of the homesites on Valley View Park Drive.

## Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

## Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used?

☒ YES ☐ NO

If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

The applicant owns one (1) of the homes in the subdivision and co-owns two (2) other of the nine (9) lots. Other owners are: (1) Robert Howe, 9 Hahn Road, Omak, WA; (2) Robert Damskov, 2 Valley View Park Drive, Omak, WA; (2) Karl Plymale, 6 Valley View Park Drive, Omak, WA; (4) Dr. Robin Lee, 8 Valley View Park Drive, Omak, WA; (5) Don Michelsen, 27 Hahn Road, Omak, WA.

B. Does the applicant own the land on which the water source is located?

☒ YES ☐ NO

If no, submit a copy of agreement:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

\_\_\_\_\_  
Applicant (or authorized representative)

Michael D. Howe

\_\_\_\_\_  
Date

7/2/03

\_\_\_\_\_  
Landowner for place of use (if same as applicant, write "same")

Michael D. Howe

\_\_\_\_\_  
Date

7/20/03



Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
_____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:   	
Please provide the additional information requested above and return your application by _____ _____ (date).	

Ecology staff \_\_\_\_\_ Date \_\_\_\_\_

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To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).